

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	5/27/01
FORMALITY REVIEW	H-T	913	03/08/01
RESPONSE FORMALITY REVIEW	B	675	06/11/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final Original	Date
1	✓	5/27/01
2	✓	5/27/01
3	✓	
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6	✓	
7	✓	5/27/01
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11	✓	5/27/01
12	✓	
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15	✓	
16	✓	5/27/01
17	✓	
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29	✓	
30	✓	5/27/01
31	✓	5/27/01
32	✓	5/27/01
33	✓	5/27/01
34	✓	5/27/01
35	✓	5/27/01
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Claim	Final Original	Date
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If more than 150 claims or 10 actions  
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